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Bib Data Sheet

CONFIRMATION NO. 5741

SERIAL NUMBER 09/710,654	FILING DATE 11/10/2000 RULE	CLASS 709	GROUP ART UNIT 2151	ATTORNEY DOCKET NO. 85300.911		
APPLICANTS Alan Bartholomew, La Canada, CA;						
** CONTINUING DATA *****						
None						
** FOREIGN APPLICATIONS *****						
None						
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 02/14/2001 on P.P. ** SMALL ENTITY **						
Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged		<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <i>[Signature]</i> Initials	STATE OR COUNTRY CA	SHEETS DRAWING 12	TOTAL CLAIMS 3	INDEPENDENT CLAIMS 1
ADDRESS 22804						
TITLE Method and apparatus for creating and posting media						
FILING FEE RECEIVED 420	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		



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CONFIRMATION NO. 5741

SERIAL NUMBER 09/710,654	FILING DATE 11/10/2000 RULE	CLASS 709	GROUP ART UNIT 2154	ATTORNEY DOCKET NO. 85300.911
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APPLICANTS

Alan Bartholomew, La Canada, CA;

** CONTINUING DATA *****
None H.P.

** FOREIGN APPLICATIONS *****
None H.P.

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
 ** 02/14/2001 *OK H.P.*

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Verified and Acknowledged	Examiner's Signature <i>[Signature]</i> Initials				

ADDRESS
 36067
 DALINA LAW GROUP, P.C.
 7910 IVANHOE AVE. #325
 LA JOLLA , CA
 92037

TITLE
 Method and apparatus for creating and posting media

FILING FEE RECEIVED 1044	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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